



BUSINESS LICENSE COMMISSION

COUNTY OF LOS ANGELES

374 KENNETH HAHN HALL OF ADMINISTRATION

500 WEST TEMPLE STREET

LOS ANGELES, CA 90012

(213) 974-7691

www.board.co.la.ca.us/blc



MEMBERS

STEVEN AFRIAT
PRESIDENT

RENÉE CAMPBELL
VICE-PRESIDENT

SARA VASQUEZ
SECRETARY

JAMES BARGER
COMMISSIONER

SHAN LEE
COMMISSIONER

July 30, 2014

Jan Lee Frishette
Studio 1 Dance Academy

HEARING ON APPLICATION FOR ANNUAL DANCE/SC **BUSINESS LICENSE ID #140640**

Dear Applicant:

The Business License Commission will hold a hearing on the above matter on **Wednesday, August 13, 2014 at 9:00 a.m.** in Room 374-A, 500 West Temple Street, Los Angeles, CA 90012. Your presence is requested at this hearing. If you are unable to attend you may authorize a representative to appear on your behalf. The representative must present signed and duly notarized letter giving authorization and the reasons you are unable to appear.

RIGHT TO REPRESENTATION / FOREIGN LANGUAGE SPEAKERS

You have the right to be represented at this hearing by an attorney or other individual of your choosing and at your own cost. In the absence of a representative, you must represent yourself and the hearing will proceed as scheduled.

If you require a translator, you must arrange at your own cost to have present at the hearing either **a professional/certified interpreter or other person who is fluent in both English and your native language.** If you are unable to locate an interpreter, please contact our office and you will be provided a list of interpreting services.

Parking is available at your cost; a map is enclosed for your convenience. **Please note proceedings begin promptly at 9:00 a.m. The Business License Commission reserves the right to reschedule your hearing to a later date for failure to timely appear.**

Sincerely,

STEVEN AFRIAT
President

Lupe Duron
Commission Staff

NOTICE TO PRINTER
STATE LAW REQUIRES THAT THIS
LEGAL ADVERTISEMENT SHALL BE SET
IN TYPE NOT SMALLER THAN NONPAREIL (6 PT.)

CUSTOMER CODE : Z 91085

NEWSPAPER :NEWHALL SIGNAL

PUBLISH 3 TIMES

1ST PUBLISHING DATE:07/10/2014
2ND PUBLISHING DATE:07/17/2014
3RD PUBLISHING DATE:07/24/2014

REPRINTS ORDERED: NONE

NOTICE OF HEARING TO CONDUCT

ANNUAL DANCE / SC

NOTICE IS HEREBY GIVEN THAT APPLICATION HAS BEEN
MADE TO THE LOS ANGELES COUNTY BUSINESS LICENSE
COMMISSION TO CONDUCT

ADVANCE PROOF REQUESTED

ADDRESS OF PREMISES:28028 N. SECO CANYON RD
SANTA CLARITA, CA 91390
NAME OF APPLICANT:STUDIO 1 DANCE ACADEMY
DATE OF HEARING:08/13/2014
TIME OF HEARING:09:00 A.M.

"ANY PERSON HAVING OBJECTIONS TO THE GRANTING OF
THE LICENSE MAY, AT ANY TIME PRIOR TO THE DATE ABOVE NAMED, FILE WITH THE BUSINESS
LICENSE COMMISSION HIS OBJECTIONS IN WRITING GIVING HIS REASONS THEREFOR, AND HE
MAY APPEAR AT THE TIME AND PLACE OF THE HEARING AND BE HEARD RELATIVE THERETO"

OFFICE OF THE COMMISSION:

BUSINESS LICENSE COMMISSION
500 W. TEMPLE STREET, RM 374
LOS ANGELES, CA 90012

RETURN TO:

LOS ANGELES COUNTY TAX COLLECTOR
BUSINESS LICENSE SECTION
225 N. HILL STREET RM. 109
LOS ANGELES, CA 90012



**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012



**BUSINESS LICENSE APPLICATION REFERRAL
SUMMARY SHEET**

KIND OF BUSINESS: ANNUAL DANCE /SC

ADDRESS OF BUSINESS: 28028 N SECO CANYON RD, SANTA CLARITA, CA 91390

TELEPHONE: 818-255-1234

OWNER OF BUSINESS: JAN LEE FRISHETTE

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: STUDIO 1 DANCE ACADEMY

MAILING ADDRESS:

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

	<u>APPROVED</u>	<u>DATE</u>	<u>SIGNATURE</u>
<input type="checkbox"/> 1. Animal Care & Control			
<input type="checkbox"/> 2. Risk Management			
<input checked="" type="checkbox"/> 3. Building & Safety	YES	05/19/14	dmiles
<input checked="" type="checkbox"/> 4. Fire Department	YES	08/29/13	dmiles
<input type="checkbox"/> 5. Public Health			
<input checked="" type="checkbox"/> 6. Treasurer & Tax Collector	YES	11/22/13	dmiles
<input checked="" type="checkbox"/> 7. Business License Commission			
<input type="checkbox"/> 8. Sheriff Department			
<input checked="" type="checkbox"/> 9. Regional Planning Commission	YES	12/06/13	dmiles
<input type="checkbox"/> 10. Weights and Measures			
<input checked="" type="checkbox"/> 11. Publishing	YES	07/10/14	tchen
<input type="checkbox"/> 12. Public Works - EPD			
<input checked="" type="checkbox"/> 13. Sheriff Fingerprint	YES	09/10/13	dmiles

Conditions:



Los Angeles County Treasurer and Tax Collector
Application for Business License



Please note: Business License fees are NOT refundable

Fee: \$ _____

ID # 140640

BUSINESS INFORMATION

Type of Business: <u>Dance studio (8298)</u>	Address of Business: <u>28028 N. Seco Cyn Rd Santa Clarita, Ca 91390</u>	
DBA (Business Name): <u>Studio 1 Dance Academy</u>	Business Telephone: <u>661-296-1268</u>	
Sellers Permit # (State Board of Equalization): <u>NA</u>	Mailing Address: <u>Tan Friskette</u>	
Business Ownership Structure: Single Owner <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> If LLC or Corporation, the information below is required:		
Date of Incorporation: <u>NA</u>	Incorporated in the State of:	
Exact Corporate Name:		
Names of Officers	Addresses	Titles

APPLICANT INFORMATION

Applicant's Full Name: <u>Tan Friskette</u>		
Home Address:		
Home Telephone:	Cell Phone:	Email address:
Social Security #:	Date of Birth: <u>1-1</u>	Place of Birth:
Driver's License or State ID#:		Expiration Date: <u>1/1</u>
Male <input type="checkbox"/> Female <input checked="" type="checkbox"/>	Height:	Weight:
Hair Color:		Eye Color:

The information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the Business License applied for, I agree to submit any additional information that may be required, to conduct all phases of this Business License in accordance with regulations established for such business and to maintain all trucks and/or equipment that may be used in connection therewith in conformance with all applicable laws, ordinances and regulations.

Date: 8/16/13 Applicant's Signature: Tan Friskette

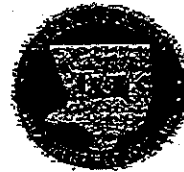
Application taken by: Tomy Chan Date: 8/16/2013

* If you suspect fraud or wrongdoing by a County of Los Angeles employee, report it to the fraud hotline at 1(800) 544-6861



**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



**BUSINESS LICENSE
APPLICATION REFERRAL**

Faxed
1/22/14

KIND OF BUSINESS: ANNUAL DANCE / SC

ADDRESS OF BUSINESS: 28028 N SECO CANYON RD, SANTA CLARITA, CA 91390

TELEPHONE:

OWNER OF BUSINESS: JAN LEE FRISHETTE

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: STUDIO 1 DANCE ACADEMY

MAILING ADDRESS:

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**BUILDING & SAFETY
SANTA CLARITA**

☒ APPROVAL

☐ DENIAL

RECOMMENDATION:

Recommend approval.

SIGNATURE:

[Signature]

DATE:

5/13/14

BASIC LICENSE NO. 8298

DATE 01/14/14

IDENTIFICATION NUMBER 140640

08/27/2013 17:13 6612971876

#1445 P.003/003

0003/004

Aug-28-2013 12:43pm From-LACOFD FIRE MARSHAL

3238904065

T-561 P.009/013 F-785

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

NRSC

KIND OF BUSINESS: ANNUAL DANCE /SC

ADDRESS OF BUSINESS: 28028 N SECO CANYON RD. SANTA CLARITA, CA 91390

TELEPHONE:

OWNER OF BUSINESS: JAN LEE FRISSETTE

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: STUDIO 1 DANCE ACADEMY

MAILING ADDRESS:

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**FIRE DEPARTMENT
LA COUNTY**

X APPROVAL

DENIAL

RECOMMENDATION: _____

SIGNATURE: _____

DATE: 8/27/13

BASIC LICENSE NO. 8298

DATE 08/20/13

IDENTIFICATION NUMBER 140640

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**

KIND OF BUSINESS: **ANNUAL DANCE /SC**

ADDRESS OF BUSINESS: **28028 N SECO CANYON RD, SANTA CLARITA, CA 91390**

TELEPHONE:

OWNER OF BUSINESS: **JAN LEE FRISHETTE**

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **STUDIO 1 DANCE ACADEMY**

MAILING ADDRESS:

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

**TREASURER & TAX COLLECTOR
LA COUNTY**

☒ **APPROVAL**

☐ **DENIAL**

RECOMMENDATION: _____

SIGNATURE: _____

DATE: _____

11-22-13

BASIC LICENSE NO. **8298**

DATE **08/20/13**

IDENTIFICATION NUMBER **140640**

ZONING REFERRAL

TO: CITY OF SANTA CLARITA
COMMUNITY DEVELOPMENT/PLANNING
23920 VALENCIA BLVD., STE # 140
SANTA CLARITA, CA 91355

I.D. #: 140640

FROM: TREASURER TAX COLLECTOR
BUSINESS LICENSE SECTION
23757 VALENCIA BLVD
SANTA CLARITA CA 91355
FAX # (661) 945-3512

DATE: 11-22-2013

TYPE OF BUSINESS(ES) DANCE

ADDRESS OF BUSINESS 28028 SECO CYN RD

CITY SANTA CLARITA ZIP CODE 91390

NAME OF OWNER JAN LEE FRISHETTE

"DBA" STUDIO 1 DANCE ACADEMY

TEL. #:

MAILING ADDRESS

EXISTING USE YES (☒) NO ()

USE PERMITTED IN ZONE
"APPROVED"

Approved

USE NOT PERMITTED IN ZONE
"DENIED"

REMARKS

SIGNATURE OF ZONING OFFICER

DATE

12/4/13

**COUNTY OF LOS ANGELES
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE
APPLICATION REFERRAL**9/3-01/73
✓ from

KIND OF BUSINESS: ANNUAL DANCE /SC

ADDRESS OF BUSINESS: 28028 N SECO CANYON RD, SANTA CLARITA, CA 91390

TELEPHONE:

OWNER OF BUSINESS: JAN LEE FRISHETTE

6/2/60

CAL. DR. LIC.#:

Allen, Jan

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: STUDIO 1 DANCE ACADEMY

MAILING ADDRESS:

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

SHERIFF FINGERPRINT

LA COUNTY

✓ APPROVAL

DENIAL

RECOMMENDATION:

Approved

SIGNATURE:

WJP Smith

DATE:

9/9/13

BASIC LICENSE NO. 8298

DATE 08/20/13

8/28

IDENTIFICATION NUMBER 140640

JAN. 11 11 51

26